

**LIFE INSURANCE CORPORATION OF INDIA**  
**CENTRAL OFFICE**

Dept : Personnel/ER  
Cir. No.: CO/PER/ER-A/217/2019

"Yogakshema",  
Jeevan Bima Marg,  
Mumbai – 400021.

05<sup>th</sup> April, 2019

ALL OFFICES OF THE CORPORATION

**Re : RENEWAL OF GROUP MEDICLAIM FAMILY FLOATER POLICY FOR THE YEAR 2019-20**

Our Group Mediclaim Policy covering in-service employees, retired employees and their dependents has been renewed for the year 2019-20 with New India Assurance Co. Ltd. Cashless facility will be available through hospitals covered under TPAs network. In cases where cashless facility is not availed or when there is some balance reimbursable amount to be claimed, claim papers will be submitted to TPAs through our Divisional/Zonal/Central Office.

TPAs have been appointed Zone wise for servicing the above policy as under:

S.No.	Office/Zone	Name of TPA	Website address and Toll Free No. (Dedicated for LIC)
1	Northern Zone/Western Zone/ Central Office	M/S MD India Healthcare Service (TPA) Pvt. Ltd.	<a href="http://www.mdindiaonline.com">www.mdindiaonline.com</a> 18002335588
2	North Central Zone/ East Central Zone	M/S Raksha TPA Pvt. Ltd.	<a href="http://www.rakshatpa.com">www.rakshatpa.com</a> 18001039533
3	Eastern Zone	M/S Heritage Health TPA Pvt. Ltd.	<a href="http://www.heritagehealthservice.com">www.heritagehealthservice.com</a> 18001024547
4	Central Zone	M/S Health India Insurance TPA Services Pvt. Ltd.	<a href="http://www.healthindiatpa.com">www.healthindiatpa.com</a> 1800220102/ 1800226970
5	South Central Zone	M/S Medi Assist India TPA Pvt. Ltd.	<a href="http://www.mediassistindia.net-Click">www.mediassistindia.net-Click</a> 18004191154
6	Southern Zone	M/S Vidal Health TPA Pvt. Ltd.	<a href="http://www.vidalhealthtpa.com">www.vidalhealthtpa.com</a> Kerala- 1800-425-6268 Tamilnadu-1800-425-7595

List of hospitals covered under network of respective TPAs is available on their website.

**1. Procedure for availing Cashless Facility:**

a) **Cashless hospitalization** can be availed only at **TPA's network of hospitals** and is subject to pre-admission authorization. The TPA shall, upon getting the related medical information from the insured person/network provider, verify that the person is eligible to claim under the policy and after satisfying itself, will issue a pre-authorization letter/guarantee of payment letter to the Hospital/Nursing Home mentioning the sum guaranteed as payable and also the ailment for which the person is seeking to be admitted as a patient.

b) The employee/retired employee has to submit E-Card of patient issued by TPA and any Photo ID cards such as ID card issued by LIC, PAN, Driving License, Voter ID Card, Passport, Aadhar Card, School/College ID cards or any other photo ID card issued by Central Govt. or State Govt.

c) In case the TPA ID card is not available then cashless request will be processed by TPA on the basis

of id card issued by LIC and other information like name of the employee/retired employee, beneficiary/claimant, SR No. of employee/retired employee.

d) TPA will remain unchanged in case of inter-zonal transfer of employee or change of his/her residence from one place to another place. Original TPA will provide the services based on PAN India's network hospital throughout the policy year.

## 2. Mediclaim Coverage:

The compulsory Family Floater Sum Insured and corresponding benefit category are as under:

BASIC PAY	CATEGORY	COMPULSORY FAMILY FLOATER SUM INSURED
Below Rs.42,195/-	III	Rs.5,00,000/-
Between Rs.42,196/- and Rs.58,689/-	II	Rs.6,00,000/-
Rs.58,690/- and above	I	Rs.10,00,000/-

Employees have also availed benefit of optional increased Sum Insured (on floater basis) for **Rs. 6 Lakh, 8 Lakh, 10 Lakh, 12 Lakh, 15 Lakh, 20 Lakh, 25 Lakh, 30 Lakh, 40 Lakh and 50 Lakh** (inclusive of the limits set out in Table above).

Sharing of premium between in-service/retired employees and the Corporation shall be only for compulsory family floater mediclaim cover. While in case of in-service employee, sharing of premium will be for the employee, spouse and two dependent children, for retired employee sharing of premium will be for retired employee, spouse and dependent disabled children only. Entire premium for the additional Floater cover shall be borne in full by the concerned employee/retired employee.

## 3. Room rent limit:

Maximum allowable Room Rent/Boarding Expenses as provided by the hospital including Nursing charges are 1.5% of Total Sum Insured (Compulsory+Additional) per day subject to maximum amount of Rs. 7500/- (for Class A cities), Rs. 5000/- (for Class B cities) & Rs. 4000/- (for other cities) per day. **However, maximum room rent limit in Class A cities for members who are covered for floater sum insured Rs.40 Lakh and 50 Lakh is Rs.9000/- per day.** Names of cities under each class are given herein below:

### Classification of Cities for Room Rent Charges

Class of City	Cities	Room Rent Limit per day
<b>A</b>	Ahmedabad, Gandhi Nagar, Bengaluru, Chennai, Hyderabad (including Secunderabad), Kolkata, Greater Mumbai, New Delhi, Faridabad, Ghaziabad, Gurgaon, Noida, Pune and Surat	Rs.7500/- (members covered upto floater sum insured Rs.30 Lakh) and Rs.9000/- (members covered for floater sum insured 40 Lakh and 50 Lakh)
<b>B</b>	Agra, Allahabad, Asansol, Bhopal, Coimbatore, Goa (Entire State), Indore, Jaipur, Jabalpur, Jamshedpur, Kanpur, Kannur, Kochi, Kozhikode, Lucknow, Ludhiana, Madurai, Mallapuram, Meerut, Nagpur, Nasik, Patna, Rajkot, Srinagar, Thrissur, Thiruvanthapuram, Vadodra, Varanasi, Visakhapatnam and Vijaywada	Rs.5000/-
<b>C</b>	Others	Rs.4000/-



In case of admission to a Hospital Room at rates exceeding the aforesaid limits, the reimbursement/payment of all other expenses incurred at the Hospital, with the exception of cost of medicines, drugs and implants, shall be reduced proportionately as per eligible room category in the Hospital.

In case of Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses, there is **No Capping/Ceiling** on ICU/ICCU expenses.

#### 4. Premium- Family Floater Mediclaim Cover

The annual premium chargeable per person for various age bands and total Family Floater Sum Insured for the policy year 2019-20 in Table A & B are as follows:

Table A

Premium applicable for Emp./Retd. Emp. and spouse of deceased Emp. or deceased Retd. Emp as Primary member							
Floater Sum Insured	0-35	36-45	46-55	56-65	66-70	71-75	76+
500000	6034	6790	10082	11818	15425	16854	21961
600000	6640	7538	11385	13385	17589	18934	24560
800000	7438	8442	12570	14993	19699	21205	27506
1000000	8181	9287	14027	16491	21670	23326	30256
1200000	8785	9973	15062	17709	23268	25047	32489
1500000	9487	10770	16267	19126	25129	27053	35088
2000000	10046	11405	17225	20253	26612	28645	37155
2500000	10529	11953	18052	21224	27889	30021	38939
3000000	10845	12311	18594	21862	28726	30921	40107
4000000	11441	12988	19617	23055	30306	32623	42313
5000000	11865	13470	20345	23922	31430	33833	43884

Table B

Premium applicable for Dependents and additional dependents of Employees/Retd. Employees (Secondary member)							
Floater Sum Insured	0-35	36-45	46-55	56-65	66-70	71-75	76+
500000	907	1358	2520	3783	4935	5394	7464
600000	1003	1510	2846	4281	5632	5746	8349
800000	1119	1686	3190	4798	6306	6784	9553
1000000	1238	1858	3508	5276	6934	7463	10287
1200000	1313	1996	3764	5665	7447	8015	11045
1500000	1425	2155	4068	6119	8042	8657	11930
2000000	1504	2280	4308	6480	8516	9167	12633
2500000	1577	2393	4515	6792	8929	9610	13244
3000000	1624	2464	4650	6996	9196	9899	13642
4000000	1715	2600	4906	7379	9700	10440	14388
5000000	1777	2694	5087	7653	10063	10830	14924

Premium rates for regular part time (RPT) employees having family floater cover of Rs.1,00,000/- are given in Annexure I.

## Illustrations for calculating premium

1. Total premium of a family which is covered for compulsory Family Floater sum insured of Rs.5 Lakh and subsidy in premium are given below in Table:

COMPULSORY FAMILY FLOATER COVER FOR Rs.5 LAKH				
Family Members	Age	Premium as per Table A & B	Subsidy in premium @75% (Col. 3 X 75%)	Net Premium payable by employee (Col. 3-Col. 4)
1	2	3	4	5
Employee	48	10082	7561.5	2520.5
Spouse	44	1358	1018.5	339.5
Child 1	20	907	680.25	226.75
Child 2	17	907	680.25	226.75
Father	74	5394	0	5394
Mother	70	4935	0	4935
<b>TOTAL</b>		<b>23583</b>	<b>9940.5</b>	<b>13642.5</b>

2. A family is covered for compulsory/basic Family Floater sum insured of Rs.600000/- and opted for Total increased Family Floater sum insured of Rs.15 Lakh. Calculation of total premium and subsidy in premium are given below:

TOTAL FAMILY FLOATER COVER FOR Rs.15 LAKH							
Family Members	Age	Premium of total Floater cover as per Table A & B	Premium of compulsory Floater cover as per Table A & B	Subsidy in premium @75% (75% X Col.4)	Premium of compulsory Floater cover payable by Employee (Col.4-Col.5)	Premium of additional Floater cover (Col.3-Col.4)	Total premium payable by employee in policy year 2014-15 (Col.6+Col.7)
1	2	3	4	5	6	7	9
Employee	52	16267	11385	8538.75	2846.25	4882	7728.25
Spouse	49	4068	2846	2134.5	711.5	1222	1933.5
Child	24	1425	1003	752.25	250.75	422	672.75
Father	78	11930	8349	0	8349	3581	11930
<b>TOTAL</b>		<b>33690</b>	<b>23583</b>	<b>11425.5</b>	<b>12157.5</b>	<b>10107</b>	<b>22264.5</b>

5. Insured under Group Mediclaim Policy for the year 2019-20 can avail the facility of **International Medical Second Opinion** on treatment for critical conditions/diseases.

### 6. Mediclaim Data and statements

All Zonal Offices are required to consolidate members' data as on 01.04.2019 of the offices under their jurisdiction and to submit it to the insurer by 15<sup>th</sup> April, 2019. The data of all beneficiaries as on 01/04/2019 is also essential for finalization of the premium. All the Zonal Offices are required to provide the age band wise and sum insured wise number of

members/beneficiaries in enclosed Excel format (Annexure –A) by 01/06/2019. Certified copy of Annexure A is also required to be submitted by Zones.

### 7. Claims Data

In addition to this, all Divisional offices are required to maintain records for claim payments in enclosed Excel format (Annexure –II). Data for claim paid is to be sent to the respective Zonal Office. The Zonal Office will consolidate the data for all the offices under its jurisdiction and submit it to Central Office as follows:

Claim Data	Last Date for receipt at C.O.
Data for the period 01/04/2019 to 31/12/2019	08/01/2020
Data for the period 01/01/2020 to 28/02/2020	07/03/2020
Data for the period 01/03/2020 to 31/03/2020	07/04/2020

It is to be brought to the notice of all the members of scheme that the claim must be filed within 20 days of discharge from the hospital.

*2019/01/01*

**Executive Director (Personnel)**

- Encl: 1. Annexure – A  
2. Annexure I  
3. Annexure – II